

For Official Use Only					
Case Number:					
Amount Paid:	\$				
Date Paid:					
Planning Department					

## HISTORIC PRESERVATION COMMISSION APPLICATION

**INSTRUCTIONS:** Incomplete applications will not be reviewed. Applications that are eligible for staff level approval are reviewed on a rolling basis. Otherwise, submit the application, checklist, fees, and required attachments on or before the application deadline. Refer to the Administrative Approval List for items that may be eligible for staff level review. Items eligible for staff review require one (1) copy of the application form and attachments. All others require 15 copies. Multiple copies must be collated and include this form.

include this form.
PROJECT INFORMATION
Site Address:
APPLICANT/AGENT INFORMATION (if same as owner information leave this section blank)
Contact Name:
Firm/Company:
Address:
Phone: Email:
OWNER INFORMATION
Name:
Firm/Company:
Address:
Phone: Email:
All correspondence will be sent to applicant/agent. If owner wishes to receive a copy, please check $\ \Box$
TYPE OF APPLICATION
NOTE: Separate application forms are required if work is from more than one section below.
Check all that are applicable:
☐ Sign ☐ Fence ☐ Addition ☐ Amendment (Case # to amended:)
Rehabilitation
Door(s) Window(s) Roofing Siding/trim Masonry Shed
Light fixture(s) Awnings Landscape/hardscape Storm/screen doors & windows
Gutters/downspouts Porch/stoop/railings Parking area Tree removal
Painting/coatings OTHER:
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☐ Complete Demolition ( Primary structure Secondary structureft²)
☐ Partial Demolition ( Primary structure Secondary structureft²)
☐ New Construction— Level 1 OR ☐ New Construction— Level 2

## HISTORIC PRESERVATION COMMISSION APPLICATION

	RE	QUIRED	ATTACHMENTS ind	licated	l with ✓				
Item Description	Sign	Fence	Rehab		Addition	Demolition	Level 1	Level 2	
Written scope of work	<b>√</b>	<b>√</b>	<b>✓</b>		<b>✓</b>	<b>√</b>	<b>√</b>	<b>√</b>	
Photograph of front elevation*	<b>√</b>	✓	✓		✓	✓	✓	<b>✓</b>	
Photograph of project area*	<b>√</b>	<b>√</b>	· ·		<b>✓</b>	✓	✓	<b>✓</b>	
Product information*	✓	✓	✓		✓			<b>✓</b>	
Plans, elevations, and detail drawings with dimensions	✓	✓	✓		<b>√</b>	✓	✓	✓	
Site plan (see checklist below)		✓	√   (site modifications only)		✓	✓	✓	✓	
*At least one copy must be in colo	r.				I			·	
	SI	TE PLAN (	CHECKLIST – FOLD I	NTO 8	½" x 11"				
☐ Scale (1"=10' or 1"=20')									
☐ North arrow			☐ Building footprint						
☐ Property boundary			☐ Site features (fences, structures, parking, etc.)						
		APPLICA	TION FEE SCHEDUL	E (circ	le fee)				
Rehabilitation/Addition				Sign	/Fence		\$2	20.00	
Residential/Duplex (less than \$500 improvement)		\$5.00	Complete Demolition						
Residential/Duplex (\$500-\$5,000 improvement)		\$20.00	Primary structure			\$5	\$500.00		
Residential/Duplex (greater than \$5,000 improvement)			\$50.00	Secor	Secondary structure (over 150 ft <sup>2</sup> )			200.00	
Commercial/Multi-family (less than \$500 improvement)		\$10.00	Secondary structure (less than 150 ft <sup>2</sup> )			\$5	0.00		
Commercial/Multi-family (\$500-\$5,000 improvement)			\$50.00	Partial Demolition					
Commercial/Multi-family (greater than \$5,000 improvement)			\$250.00	Primary structure			\$2	\$200.00	
New Construction (Level 1/2)				Secondary structure (over 150 ft <sup>2</sup> )			\$2	\$200.00	
Single family, duplex, residential outbuilding (max 2 units)			\$50.00	Secondary structure (less than 150 ft <sup>2</sup> )			\$5	50.00	
Commercial/Multi-family (less than \$5,000 improvement)			\$100.00	Amendment 50% fee					
Commercial/Multi-family (greater than \$5,0	00 improve	ement)	\$1,000.00						
I hereby certify that the owner or his/h which this application is scheduled. I case until the next regular public meetin Md. Land Use Code Ann. § 8-307 and meetings. My application may be contiderstand that my application will be decided by the have reviewed the applicable designated by the certific place of public view	understan ing. This d § 423(b inued no emed to b gn guideli cate of Ap	d that shoicertification (4)(D)(iii) more than be withdrawnesproval (CO.	uld the owner or his/h n constitutes my agree of the Land Managem two (2) times. If I fail wn and no further actio (initial) A) along with the requ o enter the yard to vie	ner agenement tent Cool to attended to the contract of the con	nt fail to atter to an extension de, in the ever end the meeting oe taken by the dilding and/or a	nd this meeting, n of the 45-day nt that I fail to a ng following the e Commission.	the HPC will review perioc ttend the afo second conti	continue thi I, as set fort rementione nuance, I ur	

Date

**Property Owner or Applicant/Agent Signature**